its release, this agent was removed from the market because it was associated with serious liver toxicity in some patients. Moreover, the patient usually pays considerable financial premium when a new drug formulation is used. Invariably, the newer drugs being marketed are significantly more expensive than older, and sometimes equally effective, drugs whose patents have expired (rendering them much less profitable to the pharmaceutical company). Again, the average patient has no insight into this fact. He or she certainly is not usually afforded the opportunity to decide autonomously whether the drawbacks and risks of a new drug formulation render it less advantageous than other, longer-established drugs. And indeed, even if the typical patient is given some knowledge of drug options, he or she lacks the expertise to participate seriously in the decision of which drug to employ. In fact, it is the physician alone who ordinarily must make the determination of which drug to employ. If this decision is based on sound, scientific data, the choice of a new and more costly drug may clearly be justified. However, to the extent that the physician does not rely on objective medical data (as published in medical journals or discussed at medical meetings), but rather derives his information from the drug companies' own representatives, a potential conflict of interest exists.

Pharmaceutical companies might respond to this assertion by observing that in our free enterprise system there is nothing wrong with vigorously marketing one's products. Indeed, in the open marketplace it is, of course, common to offer a variety of inducements, including rebates, coupons, gifts and other types of price reductions. However, this situation is not analogous to the relationship between the detail man and the physician. In the ordinary marketing arena, companies attempt to influence the purchaser and user of various products. This is categorically not the case in the relationship between the physician and the pharmaceutical companies. The patient is the passive, dependent recipient of the physician's practice decisions. By virtue of this fact, as well as the implicit covenant which exists between the physician and the patient, the physician has an obligation to strenuously avoid basing any prescription decisions on factors other than the strict medical indications for those drugs. To the extent that the physician is either unconsciously or manifestly induced to use the drugs of a given detail man or pharmaceutical company, in the absence of strict medical indication, a significant ethical problem exists.

The implications of this analysis are clearly troublesome. It would appear that the current standard of medical practice, in terms of the relationship between the physician and the pharmaceutical detail man. may readily promote outcomes not in the patient's best interest. Since the physician-patient covenant and the ethical principles which underlie it warrant that the patient's interests should be the prime focus of medicine, significant changes are warranted in the methods which pharmaceutical companies employ to market their drugs. Currently, pharmaceutical companies, medical organizations and individual physicians are clearly party to, as well as beneficiaries of the present marketing techniques. Thus, there are powerful incentives to maintain this longstanding system. The pharmaceutical companies' profit makes it understandably difficult for them to endorse sweeping changes in their current, successful marketing practices. Many medical organizations and their scientific journals are largely dependent on the advertising which is purchased by the drug companies. And certainly the individual practitioner, too, clearly benefits from the current system of gifts and gratuities.

Changes in the present system of drug marketing will doubtless come slowly. Most likely, improvements will evolve only as individual physicians become better educated about these ethical concerns and committed enough to demand alterations in the present marketing practices. The individual physician's role in this process should not be viewed as an optional one. Rather, the physician is ethically mandated to work for change in this realm of drug marketing. This responsibility derives from the physician's clinical covenant with the patient and the moral principles which underlie it. ●

MESSAGES FROM THE PRESIDENT

Messages from the President of the United States were communicated to the Senate by Ms. Evans, one of his secretaries.

EXECUTIVE MESSAGES REFERRED

As in executive session the Presiding Officer laid before the Senate messages from the President of the United States submitting sundry nominations which were referred to the appropriate committees.

(The nominations received today are printed at the end of the Senate proceedings.)

MESSAGES FROM THE HOUSE

Under authority of the order of the Senate of January 6, 1999, the Secretary of the Senate on November 3, 2000, during the recess of the Senate, received a message from the House of Representatives announcing that the House has passed the following joint resolution, in which it requests the concurrence of the Senate:

H.J. Res. 124. Joint resolution making further continuing appropriations for the fiscal year 2001, and for other purposes.

ENROLLED BILL SIGNED

Under authority of the order of the Senate of January 6, 1999, the Secretary of the Senate on November 3, 2000, during the recess of the Senate, received a message from the House of Representatives announcing that the Speaker has signed the following enrolled bill and joint resolution:

S. 2413. An act to amend the Omnibus Crime Control and Safe Streets Act of 1968 to clarify the procedure and conditions for the award of matching grants for the purchase of armor vests.

H.J. Res. 123. Joint resolution making further continuing appropriations for the fiscal year 2001, and for other purposes.

Under authority of the order of the Senate of January 6, 1999, the enrolled bill was signed by the President protempore (Mr. Thurmond).

Under authority of the order of the Senate of January 6, 1999, the Secretary of the Senate, on November 3, 2000, during the recess of the Senate, received a message from the House of Representatives announcing that the House has agreed to the following concurrent resolution, without amendment:

S. Con. Res. 160. Concurrent resolution providing for a conditional adjournment or recess of the Senate and a conditional adjournment of the House of Representatives.

The message also announced that the House has agreed to the amendments of the Senate to the joint resolution H.J. Res. 84) making further continuing appropriations for the fiscal year 2000, and for other purposes.

The message further announced that the House has agreed to the report of the committee of conference on the disagreeing votes of the two Houses on the amendment of the House of Representatives to the bill (S. 2796) to provide for the conservation and development of water and related resources, to authorize the Secretary of the Army to construct various projects for improvements to rivers and harbors of the United States, and for other purposes.

At 12:30 p.m. today, a message from the House of Representatives, delivered by Ms. Niland, one of its reading clerks, announced that the House has passed the following bills and joint resolution, in which it requests the concurrence of the Senate:

H.R. 5111. An act to direct the Administrator of the Federal Aviation Administration to treat certain property boundaries as the boundaries of the Lawrence County Airport, Courtland Alabama, and for other purposes.

H.R. 5477. An act to establish a moratorium on approval by the Secretary of the Interior of relinquishment of a lease of certain tribal lands in California.

H.R. 5630. An act to authorize appropriations for fiscal year 2001 for intelligence and intelligence-related activities of the United States Government, the Community Management Account, and the Central Intelligence Agency Retirement and Disability System, and for other purposes.

H.J. Res. 125. Joint resolution making further continuing appropriations for the fiscal year 2001, and for other purposes.

The message also announced that the House has agreed to the following concurrent resolution, in which it requests the concurrence of the Senate:

H. Con. Res. 442. Concurrent resolution providing for a conditional adjournment of the House of Representatives and a conditional recess or adjournment of the Senate.

The message further announced that the House agrees to the amendment of the Senate to the bill (H.R. 4986) to amend the Internal Revenue Code of 1986 to repeal the provisions relating to foreign sales corporations (FSCs) and to exclude extraterritorial income from gross income.

The message also announced that the House agrees to the amendment of the Senate to the bill (H.R. 2346) to authorize the enforcement by State and local governments of certain Federal Communications Commission regulations